

Achieving Better Care by Monitoring All Prescriptions (ABC-MAP)

Act 191 of 2014

ABC-MAP Board Meeting
October 22, 2019

Agenda

- Old Business
 - Approval of meeting minutes from 7/23/19
- New Business
 - Updates on initiatives
 - Data analyses
 - Overdose surveillance update
 - Update on funding and future initiatives
- Adjournment

Prescriber Education Initiative

- [Evidence-Based Prescribing: Tools You Can Use to Fight the Opioid Epidemic](#)
- Over **2,900** health care professionals educated on-site through a face-to-face education session.
 - Includes participants working in 26 counties out of 67 PA counties.
- Over **3,400** health care professionals completed online courses through TRAIN PA.
 - Includes participants working in 64 counties out of 67 PA counties, 45 states and 14 countries.

Prescriber Education Initiative - Curriculum Content

www.pa.gov/collections/opioid-epidemic | RA-DH-PDMP@pa.gov



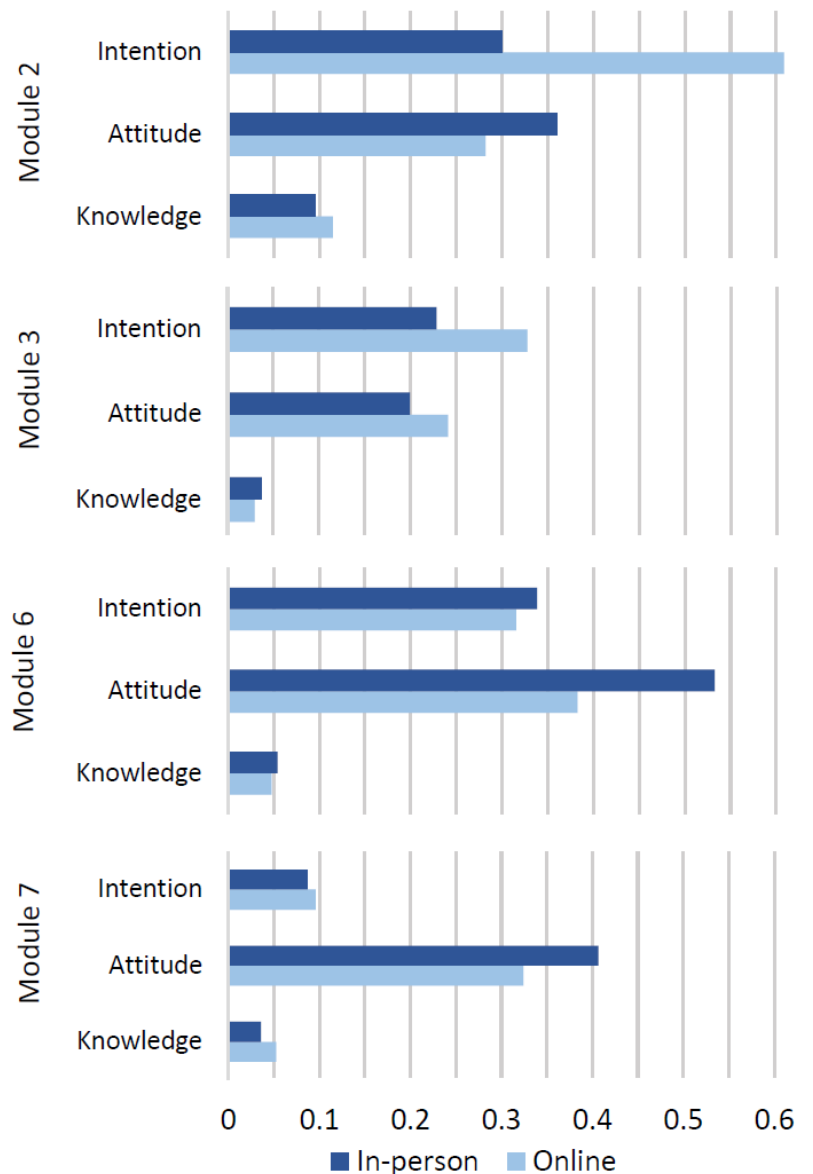
**Evidence-Based Prescribing:
Tools You Can Use to Fight the Opioid Epidemic**

Available online at www.doh.pa.gov/PDMP

- **Module 1:** Why Using the PDMP is Important for Achieving Optimal Health
- **Module 2:** How to Integrate the PDMP into the Workflow to Make Clinical Decisions
- **Module 3:** Using the PDMP to Optimize Pain Management
- **Module 4:** Opioid Prescribing Guidelines
- **Module 5:** Referral to Treatment for Substance Use Disorder Related to Opioid Use
- **Module 6:** Approaches to Addressing Substance Use Disorder with Patients
- **Module 7:** Effective Opioid Tapering Practices

Prescriber Education Initiative - Evaluation

- Both in-person and online trainings were effective in increasing knowledge and attitudes related to the educational content.
- Module 1 did not have a positive impact on knowledge scores. All other effects were positive.
- Online trainings were at least as or more effective than in-person trainings in increasing **knowledge** and **intention** scores.
- For some modules, online trainings were less effective than in-person trainings in increasing **attitude** scores.



Prescriber Education Initiative

▮ Successes:

- ▮ Group settings facilitate discussion among peers
- ▮ Partnerships with medical societies/associations lead to opportunities to reach large audiences
- ▮ Overall positive response from participants

▮ Next Steps:

- ▮ Continue curriculum delivery statewide
- ▮ Update material and create new content based on evaluation results and participant/trainer feedback
- ▮ Expand evaluation efforts with PDMP data

▶ Patient Advocate Program

- Patient Advocate Program (PAP) helps ensure continuation of care for opioid-dependent patients who have abruptly lost access to their health care provider due to a variety of factors, such as patient dismissal or cases where the healthcare provider was arrested or had their license suspended.
- Updates:
 - Patient Advocacy Coordinator hired in September.
 - Candidate for Patient Advocacy Manager selected.
 - Website, program charter, and finalized action plans are in the works.
 - Team was deployed to Fayette County on September 23rd due to an arrest of a pain physician.

Patient Advocate Program

OFFICE CLOSURE

A medical practice has closed in this area. After a medical practice closes, chronic pain patients may feel they have no other options but to turn to other sources to avoid withdrawals.

We want you to know help is available.

WHERE TO SEEK CARE

Contact your health insurance plan to locate a new health care provider.
Or

Visit a Federally Qualified Health Center (FQHC) in your area.
FQHCs are not free clinics, but do provide their services to everyone even if you are unable to pay.

To locate a FQHC in your area, call **1.866.944.2273**
or visit findahealthcenter.hrsa.gov

AVOID OPIOID OVERDOSE

Naloxone can reverse an opioid overdose and is available through a state-wide standing order, which means you do not need a prescription. Most pharmacies carry naloxone.

For more information, visit:
PA.gov/opioids

FIND DRUG TREATMENT

Help is available for those battling substance use disorder.



Call:
1.800.662.4357



Or visit:
ddap.pa.gov

- PAP team was onsite alongside state and federal law enforcement.
- Referred patients to resources to expediently reestablish care and prevent withdrawal.
- Displayed poster onsite at medical office location.
- Alerted surrounding SCAs (warm handoff specialists) of provider arrest and coordinated SCA onsite support.
- Health plans in the area were notified immediately and asked to reach out to high risk patients.
- FBI created an email address for patients to request medical records, PAP relayed this information to local SCAs and FQHCs.



If somebody has taken drugs and becomes unresponsive, call **911 immediately**.

Office closures are the result of law enforcement action independent of the Pennsylvania Department of Health.



EHR and Pharmacy System Integration

Funding for onboarding new health care entities ended on August 31, 2019. Integration initiative continues.

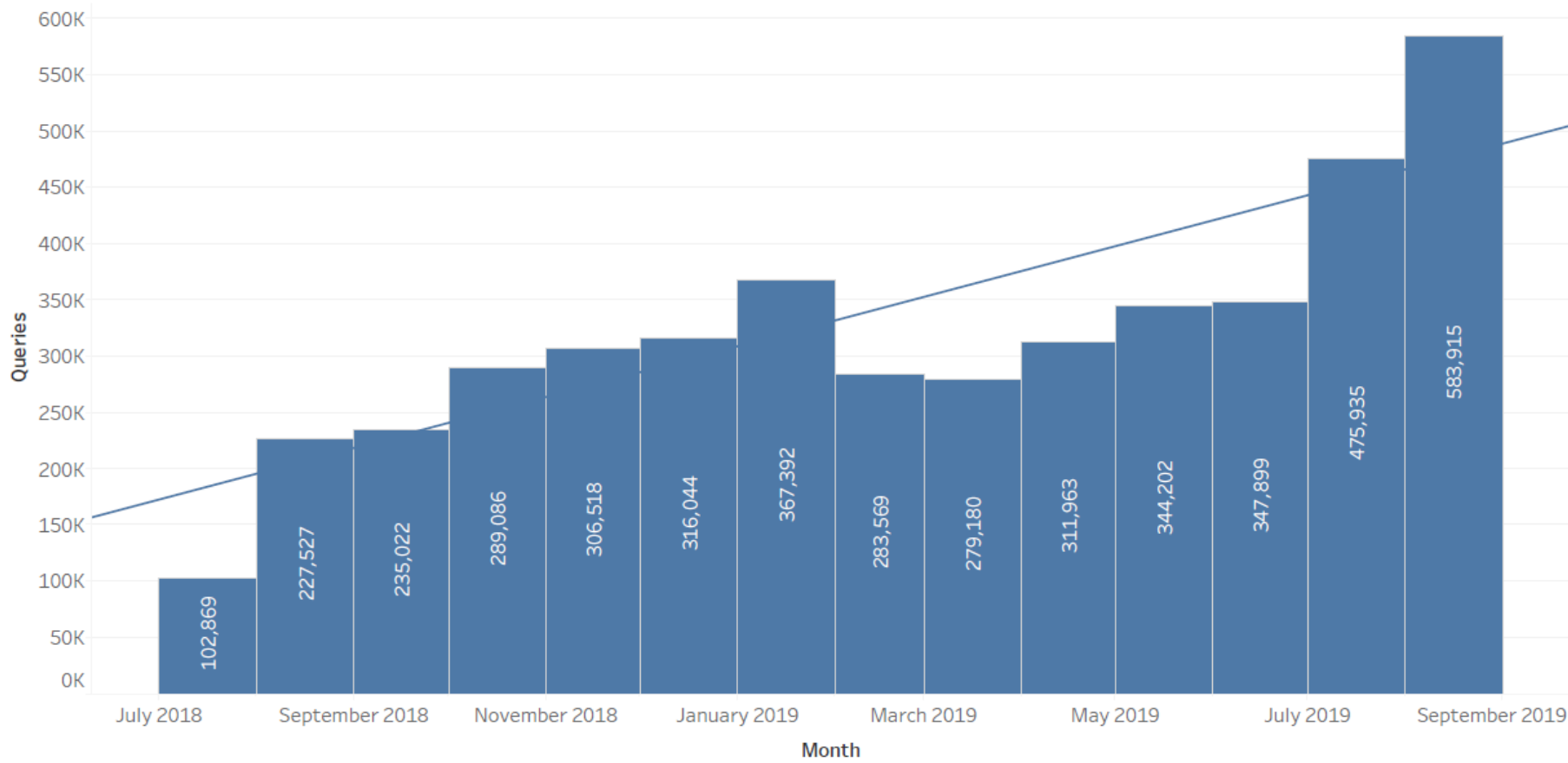
Number of EHR integrations completed:

Business type	Count of business type	Count of providers/stores
Private practice	205	2694
Health system	29	40,713
Independent hospital	25	5,883
Grand Total	259	49,290

Additionally, **1,611** Pharmacy Stores have been integrated.

EHR and Pharmacy System Integration

Integration Queries by Month

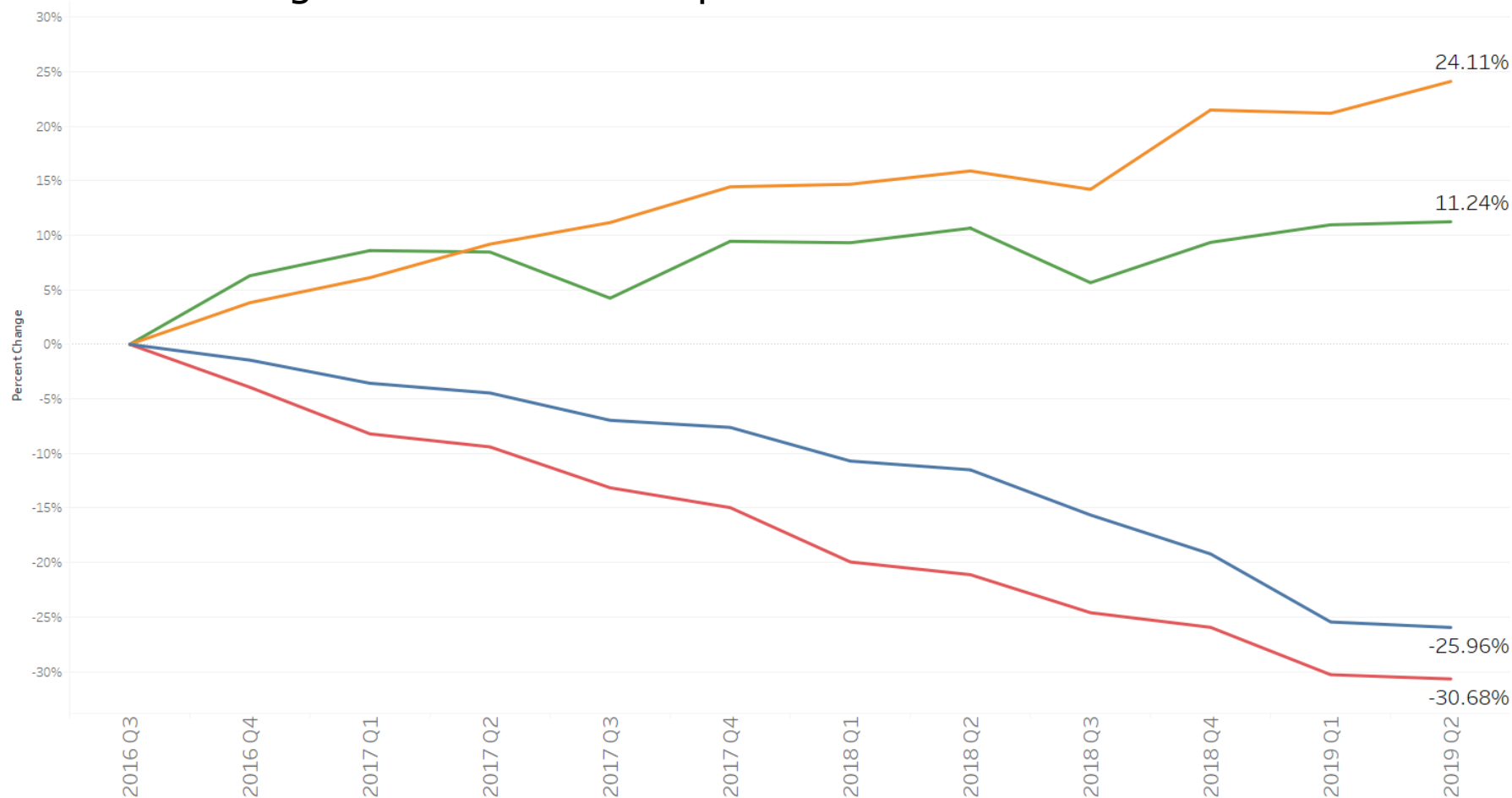


Interactive Data Report

- Quarterly updates
 - Most recent update includes updated data on controlled substances dispensations:
 - Data up to Q2 2019
 - At county level
 - By age-group
 - By gender

Analysis: Prescribing Behavior

Percent Change in Number of Dispensations Since PDMP Launched

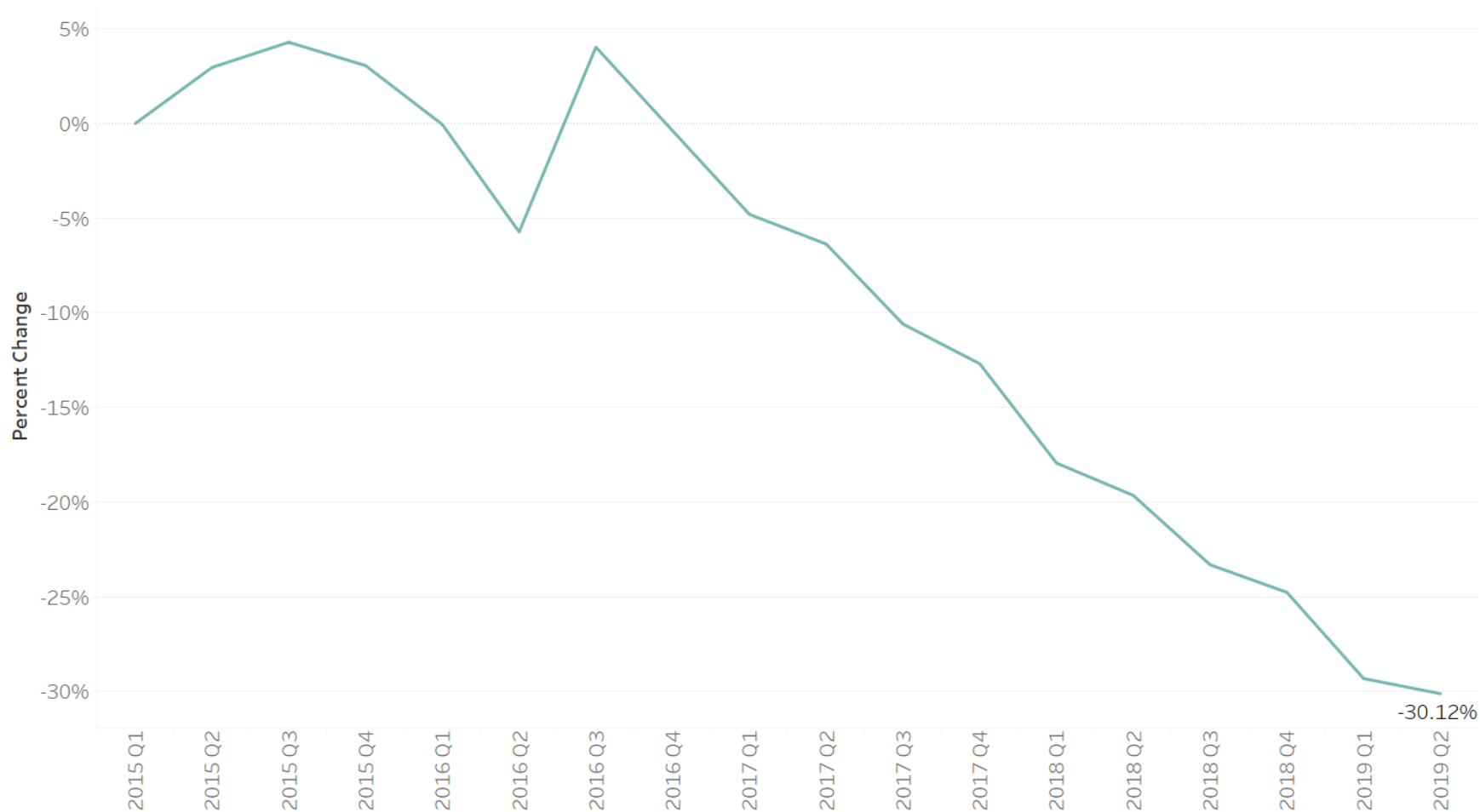


Drug Class

- Benzodiazepines
- Buprenorphine
- Opioids (All Schedules) - excluding Buprenorphine
- Stimulants

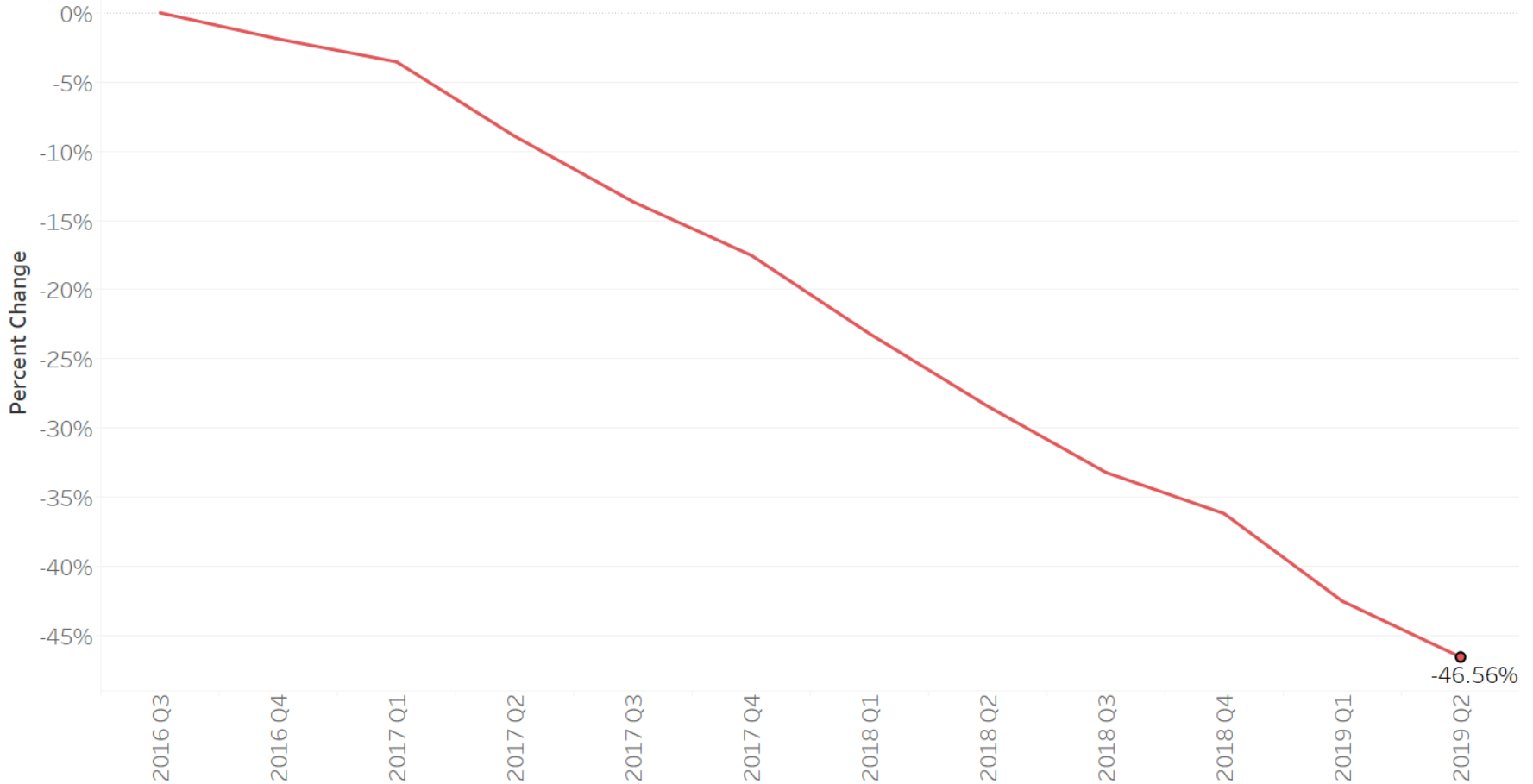
Analysis: Prescribing Behavior

Percent Change in Number of Schedule II Opioid Dispensations Since Q1 2015



Analysis: Prescribing Behavior

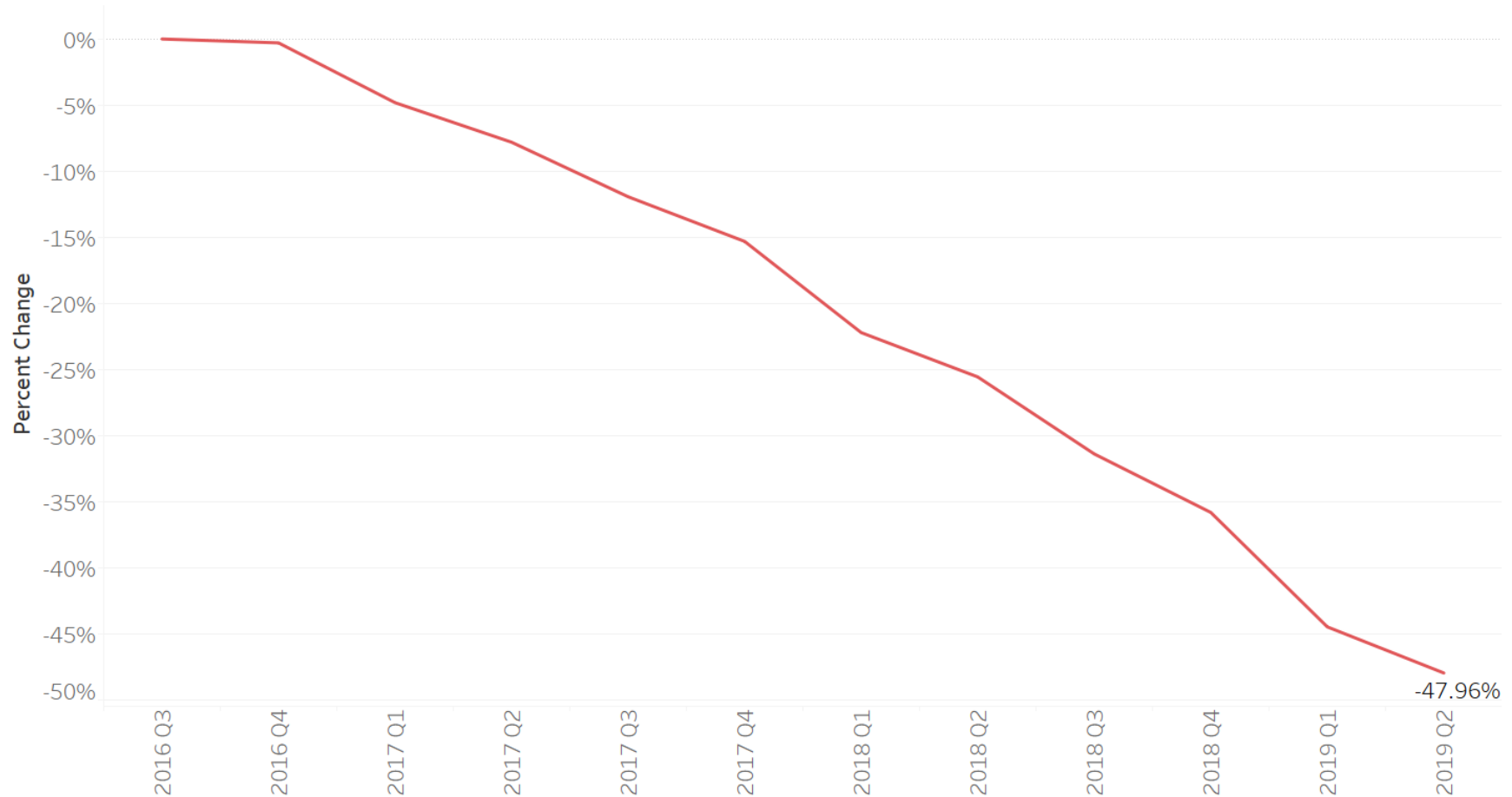
Percent Change in Number of Individuals Receiving High Dosage of Opioids (Since PDMP Launch)



High dosage of opioids defined as greater than 90MME per day

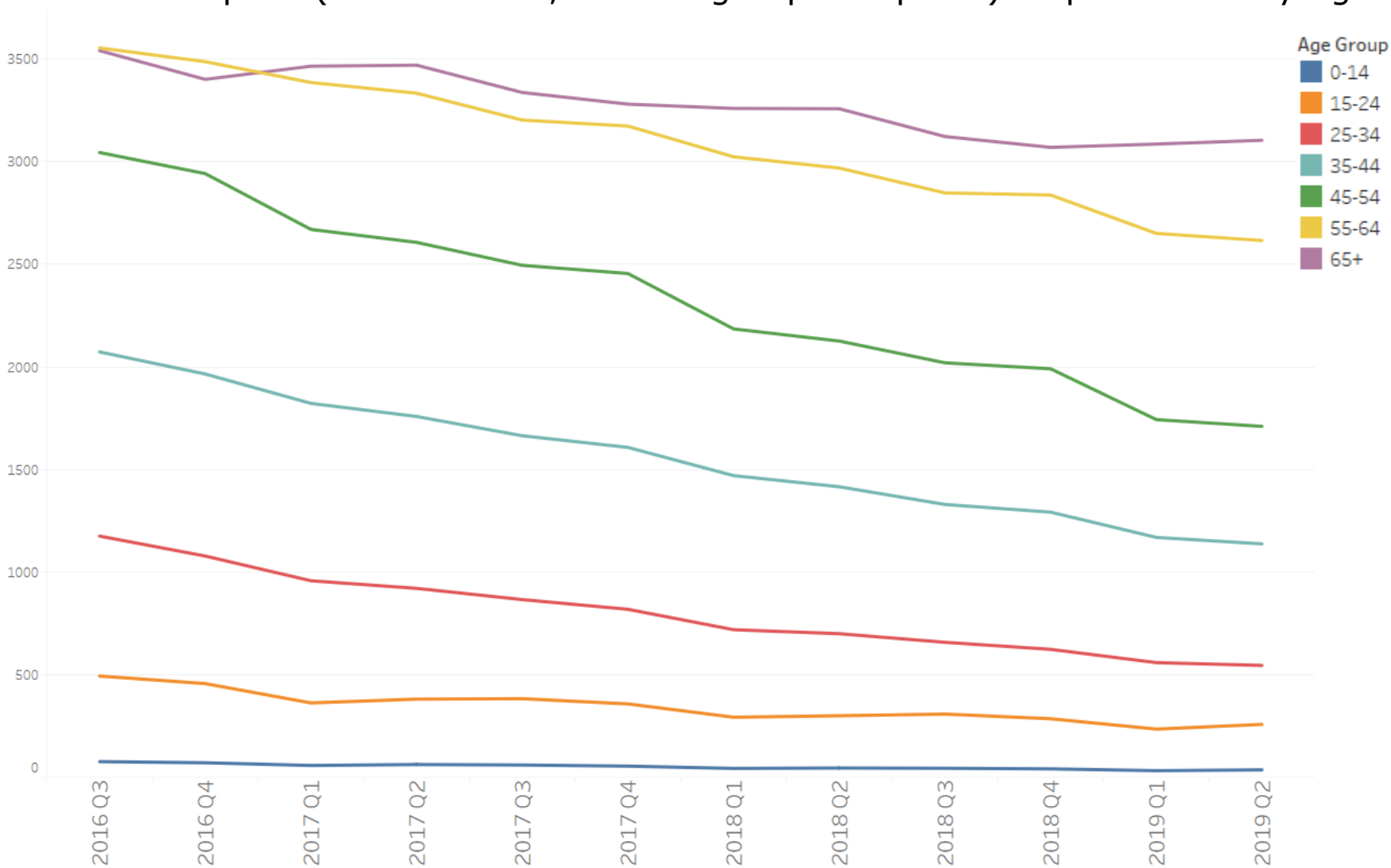
Analysis: Prescribing Behavior

Percent Change in Number of Individuals With >30 Days Overlapping Opioid/Benzo Prescriptions (Since PDMP Launch)



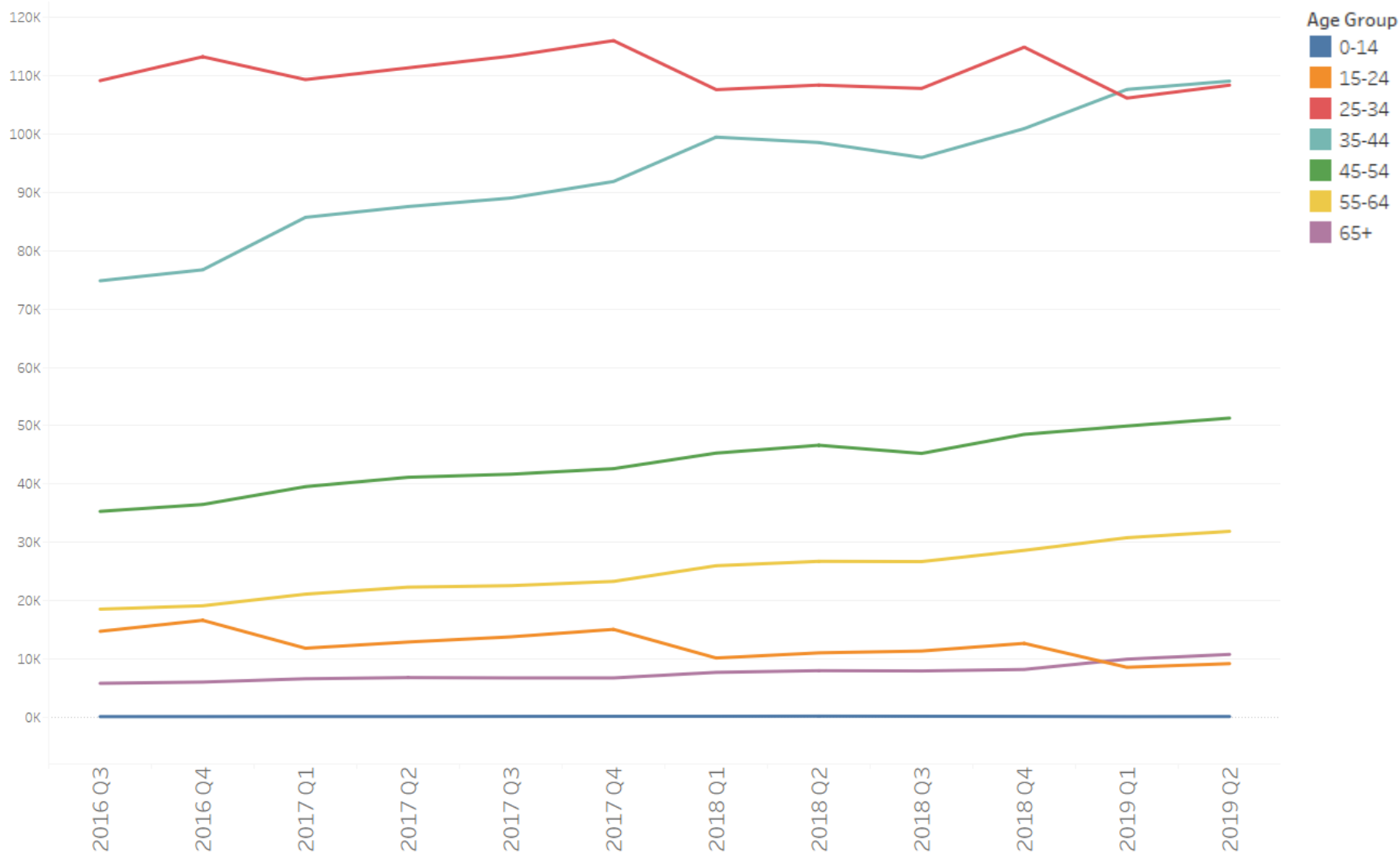
Analysis: Prescribing Behavior

Number of Opioid (All Schedules, Excluding Buprenorphine) Dispensations by Age



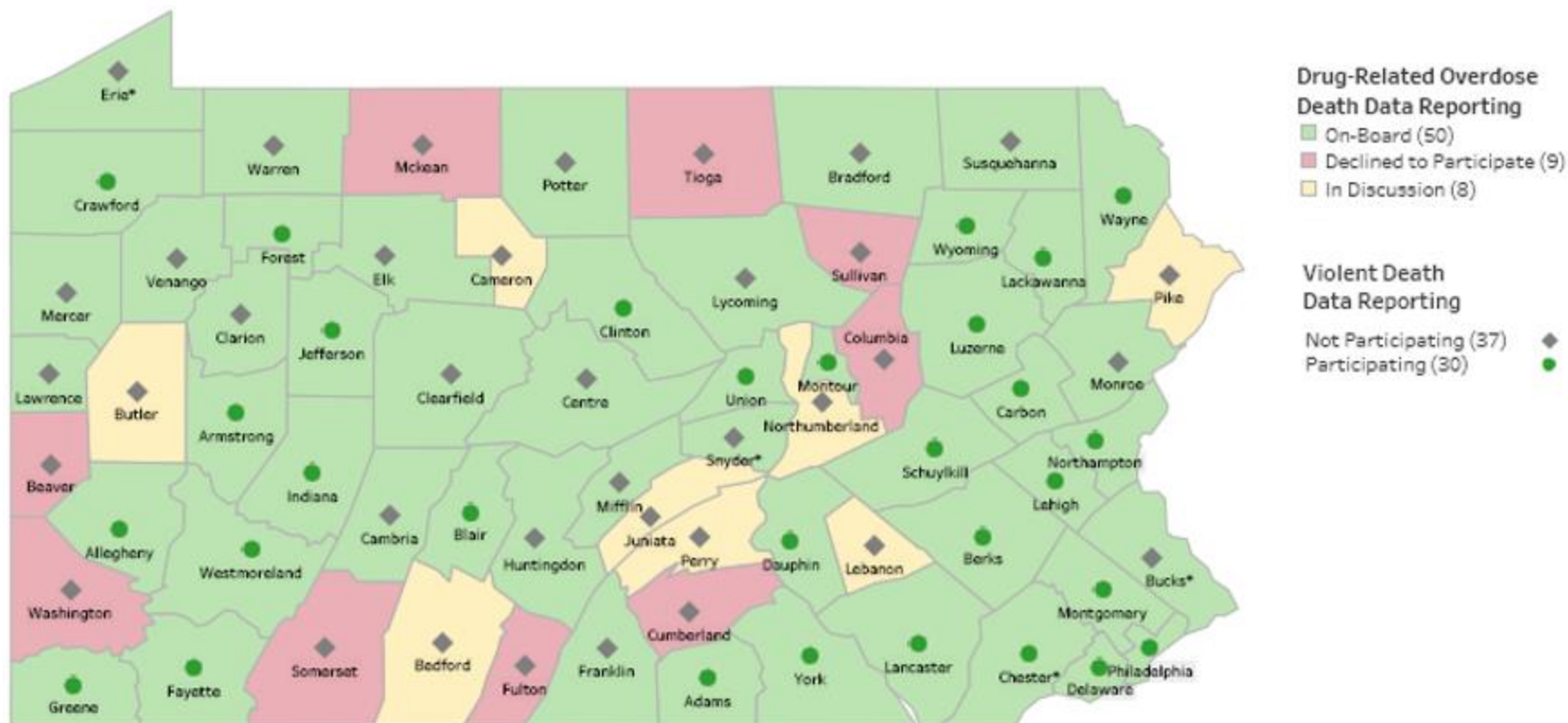
Analysis: Prescribing Behavior

Number of Buprenorphine Dispensations by Age



Coroner Participation

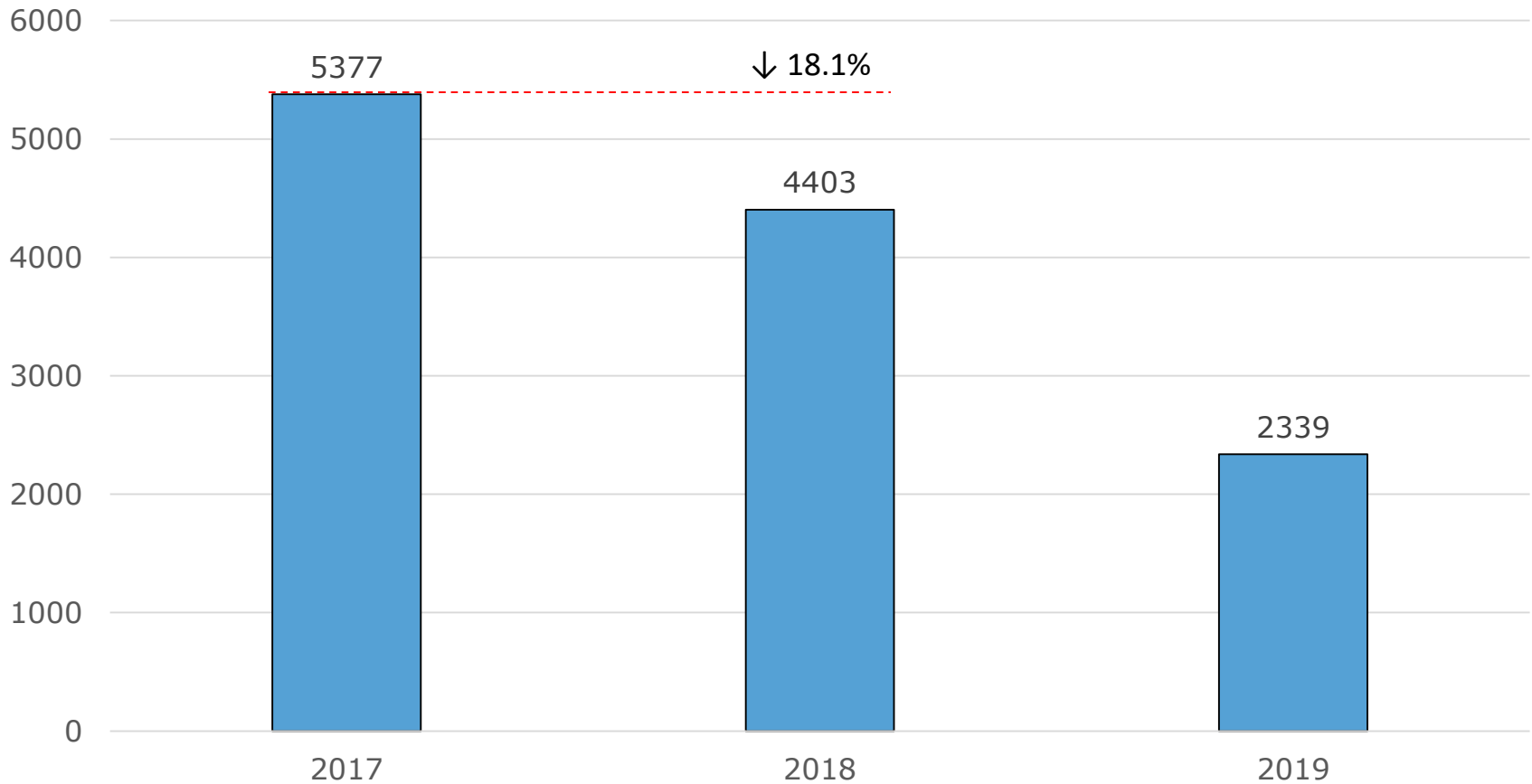
As of October 4, 2019



*Counties with partial participation in drug-related overdose death data reporting

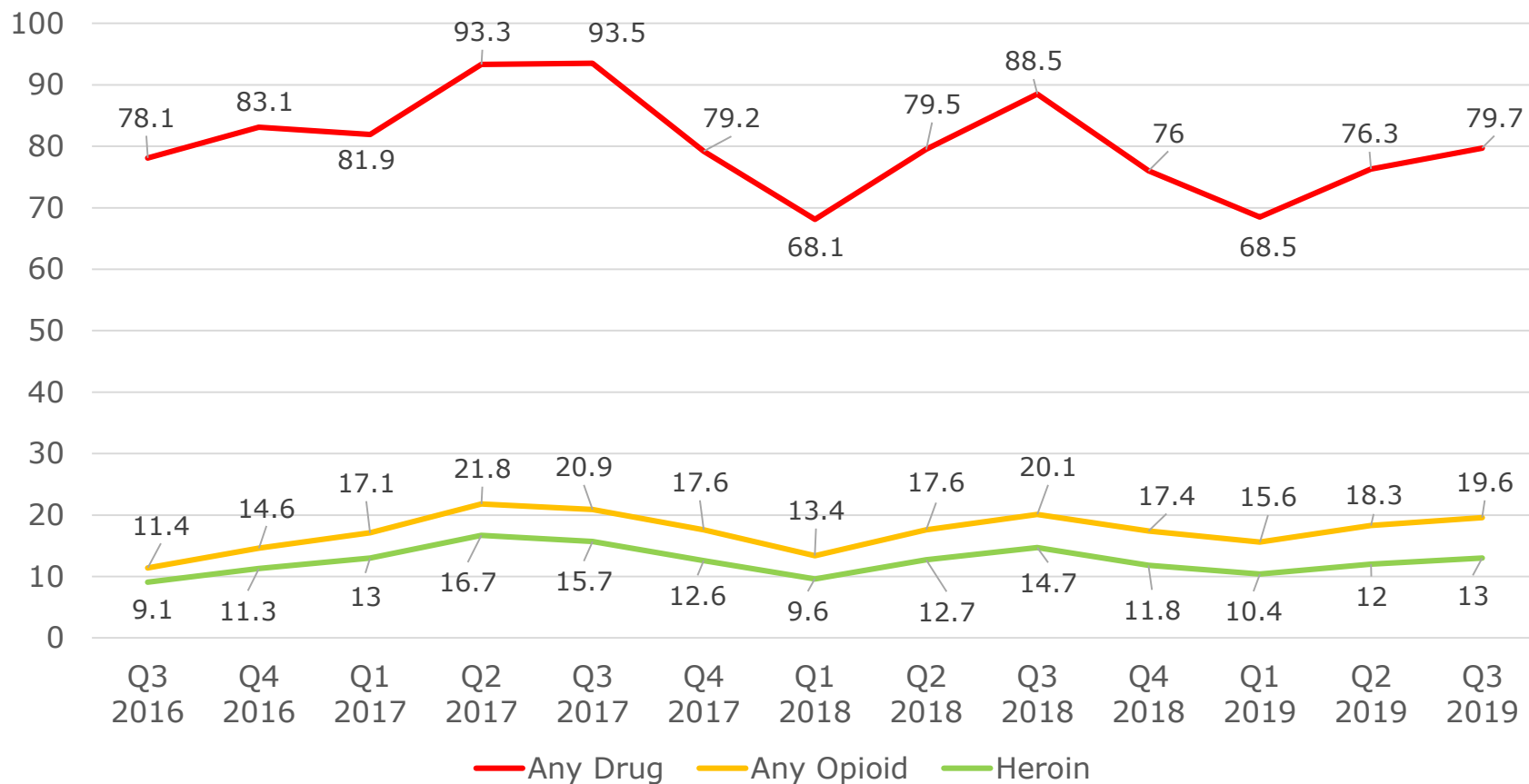
The Prescription Drug Monitoring Program (PDMP) collects accidental overdose death data from Coroners and Medical Examiners, while the Pennsylvania Violent Death Reporting System (PA-VDRS) collects undetermined overdose death data from Coroners and Medical examiners.

Estimated Accidental and Undetermined Drug Overdose Deaths - as of October 2019



2019 data is provisional

Rate of Emergency Department Visits Related to Overdose per 10,000 Visits



Funding Update

- The PDMP Office was awarded the CDC Overdose Data to Action grant
- \$8.4 million per year for three years, starting 9/1/2019.
- Activities include:
 - Collecting fatal and non-fatal overdose information
 - Predictive Analytics
 - Patient Advocacy Program
 - Increased collaboration with county and municipal health departments
 - Statewide training for first responders on naloxone best practices and stigma reduction
 - Statewide targeted academic detailing to prescribers
 - Statewide continuing medical education

Future Initiatives

- RxAwareness Campaign
 - ▣ Campaign funded by CDC Crisis Grant
 - ▣ Tells the real stories of people whose lives have been negatively impacted by prescription opioid use and abuse.

Questions?